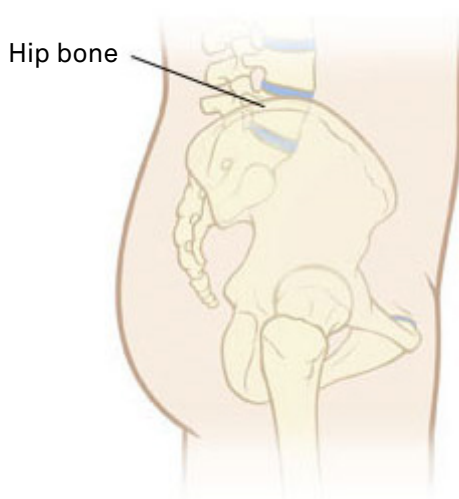


Bone Marrow Aspiration and Biopsy: Before the Procedure

Bone marrow is the soft, spongy tissue inside bones. It makes most of your blood cells. Your physician may need to take a sample of bone marrow out of the body to look for problems. This is called a bone marrow aspiration or biopsy. Aspiration means taking out a small amount of fluid and cells from the bone marrow. Biopsy means taking a solid sample of bone marrow tissue.

For either procedure, the clinician (physician, nurse practitioner or physician assistant) puts a needle into the bone to take the sample. They often use the back of the hip bone (Figure 1). Usually, the clinician performs a bone marrow aspiration and biopsy at the same time. They send the samples to a laboratory for testing.

Figure 1. Hip Bone



Purpose of the procedure

Your physician may order these procedures to:

- › Find out why you have certain blood or bone marrow problems or infections.
- › Check for cancers like leukemia.
- › See if cancer has spread to your bone marrow.
- › Monitor how well cancer treatments, such as chemotherapy, are working.
- › Prepare for treatments like a stem cell transplant.

Your physician will explain why you need the procedure and answer any questions you have.

Preparing for the procedure

Follow your physician's instructions. Tell your care team about the following:

- › Any medications you take, both prescription and over the counter. You may need to stop taking some or all of them before the procedure. These can include:
 - Blood thinners (including aspirin)
 - Herbs
 - Vitamins or other supplements
- › Any allergies to medications or any reactions you have had after taking a medication
- › Any other allergies
- › Bleeding problems
- › If you are pregnant or could be pregnant

Follow any instructions you receive about when to stop eating and drinking before the procedure.

Ask your care team if you need an adult to drive you home and help you at home after the procedure.

The day of the procedure

Before the procedure starts, the care team may give you medication to help you relax (a sedative). It may be a pill or an injection (shot).

During the procedure:

- › You will lie on your side or your stomach.
- › The clinician will mark and clean the area that will be used for bone marrow sampling.
- › A member of the care team will inject a numbing medicine (local anesthesia).
- › The clinician will make a small cut (incision) through the numbed skin.
- › They will perform one or both procedures:
 - Bone marrow aspiration. The clinician passes a thin needle through the incision and into the bone. They attach a syringe to the needle and use it to remove a sample of bone marrow fluid and cells.
 - Bone marrow biopsy. The clinician passes a different needle through the same incision and into the bone. They remove a small amount of bone marrow tissue.
- › Be sure to lie still for each procedure.
- › You may feel pressure or brief pain. This is normal.

When the procedure is done, a member of the care team will put pressure on the site to stop bleeding. Then they put a bandage on the site.

After the procedure, you will recover with us for up to 1 hour. In some cases, the recovery time might be longer. During this time, a nurse will check on you often and monitor your vital signs. Most people can go home after this short time of observation.

Recovering at home

Once at home, follow any instructions your care team gave you:

- › Take all medications as directed.
- › Care for the procedure site as instructed.
- › Check for signs of infection at the procedure site, such as changes in color or drainage.

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- › Keep the procedure site and bandage dry. Do not take a bath, swim or use a hot tub for 72 hours. You may wash with a sponge or washcloth.
 - › You may shower after 24 hours.
 - › Do not lift anything heavier than 10 pounds for 24 hours.
 - › Do not exercise until cleared by your physician says it is OK.

Call **312.695.0990** (TTY: 711) right away if you have any of these symptoms:

- › Temperature more than 100.4 degrees F
- › Increased redness or swelling, warmth or pus or bad-smelling drainage at the procedure site
- › Bleeding from the procedure site that does not stop
- › Pain that does not get better with acetaminophen
- › Increasing pain, swelling or numbness around the procedure site
- › New pain, numbness or weakness in your leg on the side of the procedure